

U.S. Patent and Trademark OfficeSOLE/JOINT INVENTOR DECLARATION
U.S. LETTERS PATENTAttorney Docket Number:
NHL-NP-45

EXAMINER: (NOT YET RECEIVED)
ART UNIT: (NOT YET RECEIVED)
SERIAL NO.: (NOT YET RECEIVED)
FILING DATE: April 1, 2004
INVENTORS: Sonia MORENO-LÓPEZ and Marcos TIMÓN-JIMENÉZ
TITLE: MEANS FOR ELICITING AN IMMUNE RESPONSE AND A
METHOD THEREFOR

SUPPLEMENTAL DECLARATION AND POWER OF ATTORNEY - Page 1

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled (name of invention) (ERFINDUNG UNTER DEM TITEL): MEANS FOR ELICITING AN IMMUNE RESPONSE AND A METHOD THEREFOR

which was filed on April 1, 2004, as Application Serial No. __, and was amended on ____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s): Priority is claimed from:

<u>Fed. Rep. of Germany</u>	<u>101 48 697.9</u>	<u>2. October 2001</u>
(Country)	(Number)	(Day/Month/Year Filed)
(LAND)	(AKTENZEICHEN)	(TAG/MONAT/JAHR ANMELDETAG)
<u>Fed. Rep. of Germany</u>	<u>101 56 678.6</u>	<u>12. November 2001</u>
(Country)	(Number)	(Day/Month/Year Filed)
(LAND)	(AKTENZEICHEN)	(TAG/MONAT/JAHR ANMELDETAG)

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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

Prior U.S. Application(s) or PCT International Application(s) Designating the U.S. for Benefit Under 35 U.S.C. §120:

<u>PCT/DE02/03798</u>	<u>2. October 2002</u>	
PCT Application No.	PCT Filing Date	U.S. Serial Number (if any)

POWER OF ATTORNEY: As a named inventor, I hereby appoint and authorize Nils H. Ljungman, Esq., Reg. No. 25,997, and Thomas N. Ljungman, Reg. No. 32,041, of P.O. Box 130, Greensburg, PA 15601, (724) 836-2305, my attorney and agent, with full power of substitution and revocation, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO: NILS H. LJUNGMAN, ESQUIRE
NILS H. LJUNGMAN & ASSOCIATES
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I hereby declare further that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the

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knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

1) Sonia MORENO-LÓPEZ2) Marcos TIMÓN-JIMENÉZ

Name(s) of Inventor(s)

(NAME(N) DES ERFINDERS ODER DER ERFINDER, VOR- UND ZUNAME)

1) _____

2) _____

Signature(s) of Inventor(s) (EIGENHÄNDIGE UNTERSCHRIFT DES ERFINDERS)

1) _____. _____. 20____
TAG MONAT2) _____. _____. 20____
TAG MONAT

Date(s) of Signature(s)

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